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MIKE LEWIS
Acting Commissioner

October 3, 2003

PROVIDER NOTICE 03-11

TO: Durable Medical Equipment Providers

SUBJECT: Motorized/Power Wheelchairs

Effective June 20, 2003, the Alabama Medicaid Agency began covering motorized/power wheelchairs for adults age 21 and above. This Provider Notice is to provide additional guidance and clarification regarding the provision of motorized/power wheelchairs.

To qualify for the motorized/power wheelchairs an individual must meet full Medicaid financial eligibility and established medical criteria. All requests for motorized/power wheelchairs are subject to the Medicaid Prior Approval provisions established by the Alabama Medicaid Agency. The patient must meet criteria applicable to manual wheelchairs pursuant to the Alabama Medicaid Agency Administrative Code Rule No. 560-X-13-.17. The attending physician must provide documentation that a manual wheelchair cannot meet the individual's medical needs, and the patient must require the motorized/power wheelchair for six (6) months or longer.

The following are policies related to the coverage of motorized/power wheelchairs:

- Motorized/power wheelchair base codes covered are K0010, K0011, K0012 and K0014. The reimbursement for K0010, K0011, and K0012 will be based on Medicaid's pricing file and fee schedule. Reimbursement for K0014 will be based on the Manufacturer's Suggested Retail Price (MSRP) minus 15%.
- Reimbursement for wheelchair accessories using procedure codes K0015 through K0107 will be based on Medicaid's pricing file and fee schedule. Accessories for the motorized/power wheelchairs will be reimbursed at a maximum of \$1200 per approved wheelchair.
- Repairs and/or replacement of parts for motorized/power wheelchairs will require prior authorization by the Alabama Medicaid Agency. Prior authorization may be granted for repairs and replacement parts for motorized/power wheelchairs not previously paid for by Medicaid and those prior authorized through the EPSDT program. Wheelchair repairs and replacement parts for motorized/power wheelchairs may be covered using the appropriate K codes listed above for wheelchair accessories or procedure code K0108 (other accessories).
- Reimbursement may be made for up to one month for a rental of a wheelchair using procedure code K0462 while patient owned equipment is being repaired.

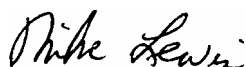
Our Mission - to provide an efficient and effective system of financing health care for our beneficiaries.

- A supplier providing motorized/power wheelchairs to recipients must be registered as a Rehab Technology Supplier (RTS) by the National Registry of Rehab Technology Suppliers (NRRTS). As an alternative, a supplier shall be certified as a Certified Rehab Technology Supplier (CRTS) or Assistive Technology Supplier (ATS) from Rehabilitation Engineering and Assistive Technology Society of North America (RESNA). Suppliers who are not presently certified may participate if they can document that they are currently involved in classes or in the application process which will result in the certification. After October 1, 2004, only suppliers who are certified may participate.

The following is the process for obtaining prior approval of a motorized/power wheelchair and accessories:

- The attending physician must provide the patient with a prescription for the motorized/power wheelchair.
- The attending physician must provide medical documentation that describes the medical reason(s) why a motorized/power wheelchair is medically necessary. The medical documentation should also include diagnoses, assessment of medical needs, and a plan of care.
- The patient must choose a Durable Medical Equipment (DME) provider that will provide the wheelchair.
- The DME provider should arrange to have the Alabama Medicaid Agency Motorized/Power Wheelchair Assessment Form 384 completed by an Alabama licensed physical therapist who is employed by a Medicaid enrolled hospital outpatient department. **The physical therapist's evaluation is paid separately and is not the responsibility of the DME provider.**
- The DME provider must ensure that the prior authorization request for the motorized/power wheelchair includes the product's model number and name, the name of the manufacturer, and a list of all wheelchair accessories with applicable procedure codes.
- The DME provider will complete the Alabama Medicaid Agency Prior Authorization Form 342 and submit Form 384 along with medical documentation from the physician and mail to EDS, Prior Authorization Unit, P.O. Box 244036, Montgomery, Alabama, 36124-4036.

If you have additional questions, you may contact Diane Moss McCall, Associate Director, LTC Provider/Recipient Services, at (334) 293-5575 or email: dmccall@medicaid.state.al.us.



Mike Lewis
Acting Commissioner

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